



## CITY OF NORTH PORT

Development Services  
Planning Division  
4970 City Hall Boulevard  
North Port, FL 34286-4100  
www.northportfl.gov  
Phone (941) 429-7156

DATE RECEIVED – DATE STAMP

### Development Master Plan Amendment Application Requirements

The following items are to be included in the submission:

- Development Master Plan Amendment Application Form and Additional Materials (*see checklist for requirements*)
- Affidavit(s)
- Development Master Plan Amendment Checklist
- Payment (*check made out to City of North Port*)

**\*Note\***

Please be advised that each application is considered a separate petition and will be reviewed as such. Packets will not be processed if incomplete or missing requested information.

If there is more than one property owner of the subject property, all owners must complete an affidavit.

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**City of North Port**  
**Neighborhood Development Services**  
4970 City Hall Boulevard, North Port, FL 34286  
Phone: (941) 429-7156 Fax: (941) 429-7164  
Web [www.northportfl.gov](http://www.northportfl.gov)

## DEVELOPMENT MASTER PLAN AMENDMENT APPLICATION

**Upon making any application to the City for any reason, the applicant agrees to comply with all the requirements of the Unified Land Development Code and further agrees to allow authorized city staff and personnel to enter and inspect the property during normal business hours**

**Application Type\*:**  Administrative (\$500)  Quasi-Judicial (\$2,000)

*\* As determined by the Director of Neighborhood Development Services*

**Project Name:** \_\_\_\_\_

**Applicant:** \_\_\_\_\_

**Corporation/LLC:** *(If Applicable)* \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

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**Property Owner:** *(if different than applicant)* \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

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**Architect/Engineer:** *(If Applicable)* \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_



Has this property undergone previous City development review and approval? No  Yes

If yes, what type of application (DMP, MAS, SCP, INF, etc) \_\_\_\_\_

If yes, when? (Month/Day/Year) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Has this property received variance, waiver, or special exception approval? No  Yes

If yes, please describe (attach extra sheets if necessary): \_\_\_\_\_

Provide the following information for the proposed development: (Answer all that apply)

Total Acres		Dwelling Units per Acre	
Total Wetland Acres		Percentage of Acres devoted to Storm Water	
Total Acres devoted to Recreational/Open Space		Percentage of Acres devoted to Open Space	
Percentage of Lot Covered by Building		Floor Area Ratio	
Total Commercial Acres		Total Building Square Footage of Commercial Use	
Total Residential Acres		Total Number of Residential Units	
Total Government Acres		Total Building Square Footage of Government Use	
Total Industrial Acres		Total Building Square Footage of Industrial Use	

**NEIGHBORHOOD MEETING:** Is the development greater than 1 acre or abutting a residential development? No  Yes  If yes, a Neighborhood Meeting is required (see ULDC §33-10(U)).

**FIRE & RESCUE:** Nearest Fire Hydrant: \_\_\_\_\_ (feet)

**TRANSPORTATION:**

List the Roadways immediately serving the site: \_\_\_\_\_

**Nearest:**

Traffic Control Light: \_\_\_\_\_ (feet) Stop Sign: \_\_\_\_\_ (feet)

Sarasota County Area Transit Stop: \_\_\_\_\_ (miles)

**UTILITIES:**

**How will Potable Water service be provided?** *Please contact North Port Utilities (941) 240-8000.*

- \_\_\_\_\_ Private Well *(Submit a letter or application from the Sarasota County Department of Health.)*
- \_\_\_\_\_ North Port Utilities *(Please provide a letter from the service provider stating that the proposed development is within their service area and that they have adequate capacity to serve the proposed development.)*

**How will Sanitary Sewer service be provided?** *Please contact North Port Utilities (941) 240-8000.*

- \_\_\_\_\_ Private Septic System *(If the property is located within the Conservation Restricted Overlay Zone, a class 1 aerobic water treatment system is required for single family home sites. Submit a letter or application to the Sarasota County Department of Health.)*
- \_\_\_\_\_ North Port Utilities *(Please provide a letter from the service provider stating that the proposed development is within their service area and that they have adequate capacity to serve the proposed development.)*

**STORMWATER:** *Please contact the City Stormwater Manager, Elizabeth Wong at (941) 240-8321.  
(Flood Information can be found at <http://www.northportfl.gov> Search: Flood Update)*

**Is the application site in a FEMA Hazardous Flood Zone?** No \_\_\_\_\_ Yes \_\_\_\_\_  
If yes, what zone? \_\_\_\_\_

**Is the application site in the Conservation Restricted Zone?** No \_\_\_\_\_ Yes \_\_\_\_\_  
If yes, what zone? \_\_\_\_\_

**Is the application site in the Big Slough Watershed Flood Zone?** No \_\_\_\_\_ Yes \_\_\_\_\_  
If yes, what is the 100-year 1-day flood elevation? \_\_\_\_\_ ft. NGVD

**Does the application site contain wetlands?** No \_\_\_\_\_ Yes \_\_\_\_\_  
If yes, how many existing wetland acres: \_\_\_\_\_

**Has the Departmental of Environmental Protection been notified of wetlands?** No \_\_\_\_\_ Yes \_\_\_\_\_

**Is the property located in the Myakka River Protection Zone?** No \_\_\_\_\_ Yes \_\_\_\_\_

**Is the property adjacent to the Myakka River jurisdictional wetlands?** No \_\_\_\_\_ Yes \_\_\_\_\_  
If yes, please provide acreage and map of the area and schedule a meeting with City Stormwater Manager.

**ENVIRONMENTAL:**

**Are there any known Historical or Archaeological sites on the property?** No \_\_\_\_\_ Yes \_\_\_\_\_  
*(If unsure, please contact Sarasota County – Division of Historical Resources (941) 316-1115.)*

Please describe: \_\_\_\_\_

**Has an Environmental Assessment Report/Review been prepared for this property?** No \_\_\_\_\_ Yes \_\_\_\_\_  
If yes, Date survey was conducted: \_\_\_\_\_

Does the property contain gopher tortoise burrows, scrub jay habitat, or any plant or animal species listed as “rare”, “threatened”, “endangered”, or “species of special concern” by State and /or Federal agencies? If yes, the applicant will be required to produce documents on how listed species or habitats will be protected or managed at the Site Development stage. No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, please indicate which species: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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All information provided on this application is true and correct to the best of my knowledge.

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Signature of Applicant

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Date

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Print Applicant Name

# Checklist of Required Submittal Items:

## DEVELOPMENT MASTER PLAN AMENDMENT ULDC SECTION 53-7

For Items 2-16 below, please describe what, if anything, would change due to the proposed amendments, and address the related impact associated with the amendments.

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**Please send DIGITALLY to [developmentpetitions@northportfl.gov](mailto:developmentpetitions@northportfl.gov) the following for distribution to reviewers: *\*Please mark NA for items that are not applicable***

- Item 1: Application (Section 53-7 C.3)**  
Application form Provided by the City. Title of the project and names and addresses of any and all owners and agents involved in the development. The name of the attorney preparing any legal documents. The zoning classifications and future land use designation for the subject property, as well as for all abutting property.
- Item 2: Project Narrative (Section 53-7 A)**  
Provide an explanation of the project and the proposed amendments in plain language including any changes to access, parking, internal circulation, drainage, traffic impacts, etc.  
  
The developer shall also provide findings that demonstrate that the proposed DMP complies with the City of North Port Comprehensive Plan; the zoning regulations; and other sections of this Unified Land Development Code and other laws, ordinances, and regulations.
- Item 3: Ownership Documentation (Section 53-7 C.4)**
  - a. Title Assurance or Current Deed, in the form of either a title certification by an attorney or a title insurance policy will be required. This title will match the Boundary, Topological, and other Maps of Item 6.
  - b. Letter of Authorization, a notarized letter signed by all owners of the property authorizing the applicant to submit and be responsible for the application, if applicant is not the owner.
  - c. Ownership and Unified Control, a notarized statement of ownership or unified control of the entire subdivision.
  - d. Articles of Corporation/Organization, a set of formal documents filed with a government body to legally document the creation of a corporation. If Corporation or LLC is applicable it is necessary for the City to be aware of such business ties. Articles of incorporation must contain pertinent information such as the firm's name, street address, agent for service of process, and the amount and type of stock to be issued.
- Item 4: Planned Community Development Conformance (Section 53-7 C.1 and C.13)**  
A statement of conformance with the intent and purpose of the PCD District as set forth in Sec. 53-115 of the Code and, if applicable, an approved application for a Development of Regional Impact (DRI).
- Item 5: Modifications/Waivers (Section 53-7 C.2)**  
A description of any proposed modifications of zoning or other applicable City regulations where it is intended by the applicant that such modifications serve the public interest to an equivalent degree.

**Item 6: Map of Approved Development Master Plan with Proposed Amendments "Clouded" (Section 53-7 C.5)**

The Approved Plan used as the base for the proposed amendments shall include the entire DMP area, as well as all properties contiguous for the evaluation of connectivity, design and aesthetic planning purposes as required in the Comprehensive Plan. (Section 53-7 B)

- (a) Scale, date, North arrow and general location map.
- (b) Boundaries, dimensions and acreage of the property involved and all existing streets, buildings, watercourses, easements, section lines and other important physical features, including major trees and tree masses in and adjoining the property
- (c) Generalized topography and soil condition.
- (d) Areas of historical or archaeological significance.
- (e) Generalized layout and description of drainage systems, potable water service, wastewater treatment and disposal service, solid waste disposal service and electric transmission and distribution service.
- (f) General locations and acreage or percentage of the uses proposed, including residential, commercial, industrial and government uses, buffer areas, open space, recreational uses, off-street parking and loading, foot paths, vehicular access using already designed roadways and by way of combined pedestrian and vehicular bridges to provide connectivity to adjacent neighborhoods, traffic flow and generalized landscaping plan as appropriate.
- (g) A development schedule indicating the approximate phasing of construction improvements.

**Item 7: Traffic Impact Statement (Section 53-7 C.6 and C.13)**

Provide a traffic impact statement (TIS) indicating how the proposed development will affect the adjacent neighborhood(s) and the primary impact area. The methodology, data and model shall be approved by the designated City Engineer, or designee.

**Item 8: Hurricane Evacuation (Section 53-7 C.7)**

Provide a hurricane evacuation plan which indicates what on-site/off-site provisions will be made for storm shelter space. This requirement only applies to proposed development within a designated hurricane storm surge zone.

**Item 9: Wetlands Survey (Section 53-7 C.8 and C.13)**

A wetlands survey which enumerates the acreage of wetlands on the site, what alterations or disturbances to wetlands are proposed and what wetlands will be preserved in their natural existing state; site plan showing the proposed development shall be submitted.

The wetlands survey and any alteration of the wetland shall be reviewed by the appropriate State agency or a Phase I Environmental Assessment shall be submitted. The State agency's comments, if available, shall be submitted with the Development Master Plan (DMP), application or prior to scheduling the Planning and Zoning Advisory Board hearing.

**Item 10: Wildlife Survey (Section 53-7 C.9 and C.13)**

A wildlife survey with a site plan, which identifies all species, including aquatic life, which nest, feed, reside on or migrate to the development tract.

- (a) The survey shall specify what measures will be taken to protect the wildlife and their habitats.
- (b) In the event wildlife species are considered endangered or threatened or of special concern, the Development Master Plan (DMP) shall identify such species and describe all proposed steps that shall be taken to protect them.
- (c) The wildlife survey and any proposed protective measure(s) shall be reviewed by the appropriate State agency.



(d) The State agency's comments shall be submitted with the Development Master Plan (DMP) application or prior to scheduling the Planning and Zoning Advisory Board hearing.

**Item 11: Vegetation Survey (Section 53-7 C.9 and C.13)**

A vegetative survey, including a site plan, which identifies dominant plant communities, dominant species and other unusual or unique features of the vegetation association.

(a) In the event there are any rare or endangered plants on the site, the Development Master Plan (DMP) shall identify such plants and describe the proposed protective measures to be taken.

(b) The vegetative survey and any proposed protective measure shall be reviewed by the appropriate State agency or a Phase I Environmental Assessment shall be submitted.

(c) The comments of the State agency, if available, shall be submitted with the Development Master Plan (DMP) application or prior to scheduling the Planning and Zoning Advisory Board hearing.

**Item 12: Financial Analysis (Section 53-7 C.11 and C.13)**

*[NOTE: THE ANALYSES DESCRIBED BELOW WILL BE PERFORMED BY CITY STAFF WITH PERTINENT INFORMATION PROVIDED BY THE APPLICANT.]*

There shall be performed a financial analysis, in a form and methodology as approved by staff, that defines the costs of providing City services to maintain adopted levels of service and the revenues that will be generated by the project within the first five years, and each subsequent five-year period until and including the expected buildout.

Based on this analysis, the applicant shall provide a further analysis that defines the development's proportionate fair share of the cost to maintain the levels of services. The timing of the improvements shall be incorporated into the development's phasing schedule, which shall be consistent with the City's Capital Improvement Project (CIP).

**Item 13: Deed Restrictions (Section 53-7 C.12 and C.13)**

Proposed deed restrictions or covenants or conditions of lease by which the developer proposes to bind those buying or leasing building sites to certain performance standards.

**Item 14: Building Elevations (Section 53-7 C.14)**

Examples of building elevations, including colors and material to be used on the facades, consistent architectural standards and documents indicating how the applicant shall enforce the architectural standards, mass of the structures and special relationships shall be submitted.

**Item 15: Storm Water Analysis (Section 53-7 C.15)**

Provide a storm water analysis/assessment using a professionally accepted methodology. Data and model shall be approved by the City Manager or designee.

**Item 16: Additional Information (Section 53-7 C.16)**

Any information not specifically called out by this list that the applicant feels pertinent to the development.

**Digital files:**

**Item 17: The entire submittal package, in PDF format, submitted to [developmentpetitions@northportfl.gov](mailto:developmentpetitions@northportfl.gov)**

Please submit all project related spatial information in GIS Shapefile or File Geodatabase format as well. The data must have coordinates in at least 4 corners of the petition area, and not include any data from outside the project area. The Coordinate system must be: A Projected Coordinate System, State Plane, NAD 1983 HARN StatePlane Florida West FIPS 0902 (US Feet).

# AFFIDAVIT

I (the undersigned), \_\_\_\_\_ being first duly sworn, depose and say that I am the owner, attorney, attorney-in-fact, agent, lessee or representative of the owner of the property described and which is the subject matter of the proposed application; that all answers to the questions in this application, and all sketches, data and other supplementary matter attached to and made a part of the application are honest and accurate to the best of my knowledge and belief. I understand this application must be complete and accurate before the application can be processed or hearing can be advertised, and that I am authorized to sign the application by the owner or owners. I authorize City of North Port staff and agents to visit the site as necessary for proper review of this application. *If there are any special conditions such as locked gates, restricted hours, guard dogs, etc., please provide the name and telephone number of the individual who can allow access.*

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,

\_\_\_\_\_  
Signature of Applicant or Authorized Agent

\_\_\_\_\_  
Print Name and Title

**STATE OF** \_\_\_\_\_,

**COUNTY OF** \_\_\_\_\_

The foregoing instrument was acknowledged by me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification.

(Place Notary Seal Below)

\_\_\_\_\_  
Signature - Notary Public

## AFFIDAVIT AUTHORIZATION FOR AGENT/APPLICANT

I, \_\_\_\_\_, property owner, hereby authorize \_\_\_\_\_ to act as Agent on our behalf to apply for this application on the property described as (legal description) \_\_\_\_\_

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date

**STATE OF** \_\_\_\_\_,

**COUNTY OF** \_\_\_\_\_

The foregoing instrument was acknowledged by me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification.

(Place Notary Seal Below)

\_\_\_\_\_  
Signature - Notary Public